

**Commonwealth of Kentucky
Kentucky State Board for Proprietary Education
PO Box 1360
Frankfort, Kentucky 40602
502/564-3296, ext. 239**

**LICENSE RENEWAL APPLICATION
RESIDENT SCHOOL**

Fax Number: _____

Please indicate any change in the school address below:

-
1. Mailing Address: _____
(If different from above) _____
 2. Name(s) of Owner(s): Attach list of all school owners full name, mailing address, telephone number, electronic mail address and facsimile number.
 3. Name of Chief School Administrator: _____
 4. Has ownership changed since previous application? ____ Yes ____ No If yes, give details on separate attachment.
 5. Present enrollment: _____ Total enrollment during year (include present enrollment): _____
Number graduating during year: _____
 6. Present instructional staff: _____ Full-time _____ Part-time (Submit School Personnel Form for each instructional staff member.
 7. List all programs/courses offered and currently approved by the board. List title of program/course(s) as will appear on the school's license. (Attach separate sheet if necessary.)

Name of Course	Type of Program (Certificate/Diploma)	Estimated Time to Complete	Length of Program	Hrs/Wks/Credit Hours
1.				
2.				
3.				
4.				
5.				

List **all** Federal and/or State Financial Aid programs offered by the school:

Name/Title _____ Type _____

Name/Title _____ Type _____

Name/Title _____ Type _____

8. The following items **must** be attached as part of this application:

- A. **Copy** of current school catalog, certified as being true and correct in content and policy.
- B. **Copy** of student contract or agreement form, including same school refund policy in the catalog.
- C. **Copy** of current evidence of compliance with appropriate fire, safety, and health codes.
- D. **Original** Proprietary School Bond or Continuation Certificate for surety bond # _____.
- E. PE-007 form indicating annual renewal license fees properly signed and notarized with appropriate non-refundable fee. Fee must be by check or money order made payable to the **Kentucky State Treasurer. DO NOT SEND CASH.**
- F. Completed School Personnel Form for each instructor.
- G. License Renewal Application Addendum.

9. I certify that all information given is true and correct to the best of my knowledge and that all School Personnel meet the minimum requirements as set forth in KRS 165A.370:

(Signature of Authorized School Official)

(Title)

(Name of School)

(Date)

This form must be completed in its entirety and submitted to the board office with the annual license renewal fee as determined on form #PE-007 no later than May 15.

All fees must be paid by check or money order made payable to the KENTUCKY STATE TREASURER. DO NOT SEND CASH.

If your school is accredited, a copy of the annual report submitted to your institution's accrediting agency must be included with this license renewal application.